FINANCIAL STATUS REPORT



(Short Form)

(Follow instructions on the back)

Federal Agency a to Which Report i	and Organizational Element is Submitted	Federal Grant or Oti By Federal Agency	her Identifying Number Assign	ed	OMB Approval No.	Page of
C/O FEC 999 E	Street N.W.	CDFA 39.011 - Se	ec 102		0348-0038	1 1 pages
3. Recipient Organia	zation (Name and complete	address, including ZIP cod-	e)			<u> </u>
Oregon Secreta 255 Capitol Stre	ary of State eet NE, Ste 180, Saler	n OR 97310				
4. Employer Identific	cation Number	5. Recipient Account N	lumber or Identifying Number	6. Final Report	7. Basis	
93-6001784		1650000401		Yes 🗸 No	☐ Cash ☑	Accrual
-	eriod (See instructions)		9. Period Covered by	•		
From: (Month, D	ay, Year)	To: (Month, Day, Year)		, Year)	To: (Month, Day	y, Year)
5/1/2003			1/1/2004		12/31/2004	
10. Transactions:			l Previously Reported	II This Period	III Cumula	ative
a. Total outlay	S		0.00	1,686,406.00	1,6	886,406.00
b. Recipient sl	hare of outlays		0.00	0.00		0.00
c. Federal sha	re of outlays		0.00	1,686,406.00	1,€	86,406.00
d. Total unliqu	idated obligations					0.00
e. Recipient s	share of unliquidated obligat	ions				0.00
f. Federal sha	re of unliquidated obligation	s				0.00
g. Total Federa	al share(Sum of lines c and	9			1,€	686,406.00
h. Total Feder	al funds authorized for this t	unding period			1,8	322,758.00
i. Unobligated	balance of Federal funds(Li					136,352.00
	a. Type of Rate (Place "X		Predetermined	Final	☐ Fixed	
11. Indirect Expense	b. Rate	c. Base	d. Total Amount		Federal Share	
	N/A	N/A	di Fotal / tillodili		. coorar onaro	
12. Remarks: Attac legislation.	h any explanations deemed		equired by Federal sponsoring	agency in compliance v	vith governing	
Public Law 107-	-252 Section 102 - Re	placement of Punch C	ard or Lever Voting Mad	chines.		
13. Certification: I	certify to the best of my k	nowledge and belief that t	this report is correct and co	mplete and that all out	lays and	
		re for the purposes set for	rth in the award documents.	T		
Typed or Printed Na	me and Title			Telephone (Area code	number and exte	ension)
• • • • • • • • • • • • • • • • • • • •	ecretary of State	<i></i>		503.986.2238		
Signature of Authoriz	zed Certifying Official	My		Date Report Submitted February 28, 200		
NSN 7540-01-218-4	387		269-202		Standard Form 26	9A (Rev. 7-97

Standard Form 269A (Rev. 7-97) Prescribed by OMB Circulars A-102 and A-110

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Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0038), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Please type or print legibly. The following general instructions explain how to use the form itself. You may need additional information to complete certain items correctly, or to decide whether a specific item is applicable to this award. Usually, such information will be found in the Federal agency's grant regulations or in the terms and conditions of the award. You may also contact the Federal agency directly.

Item Entry Item Entry

- 1, 2 and 3. Self-explanatory.
- 4. Enter the Employer Identification Number (EIN) assigned by the U.S. Internal Revenue Service.
- 5. Space reserved for an account number or other identifying number assigned by the recipient.
- 6. Check *yes* only if this is the last report for the period shown in item 8.
- 7. Self-explanatory.
- 8. Unless you have received other instructions from the awarding agency, enter the beginning and ending dates of the current funding period. If this is a multi-year program, the Federal agency might require cumulative reporting through consecutive funding periods. In that case, enter the beginning and ending dates of the grant period, and in the rest of these instructions, substitute the term "grant period" for "funding period."
- 9. Self-explanatory.
- 10. The purpose of columns I, II, and III is to show the effect of this reporting period's transactions on cumulative financial status. The amounts entered in column I will normally be the same as those in column III of the previous report in the same funding period. If this is the first or only report of the funding period, leave columns I and II blank. If you need to adjust amounts entered on previous reports, footnote the column I entry on this report and attach an explanation.
- 10a. Enter total program outlays less any rebates, refunds, or other credits. For reports prepared on a cash basis, outlays are the sum of actual cash disbursements for direct costs for goods and services, the amount of indirect expense charged, the value of in-kind contributions applied, and the amount of cash advances and payments made to subrecipients. For reports prepared on an accrual basis, outlays are the sum of actual cash disbursements for direct charges for goods and services, the amount of indirect expense incurred,

10b. Self-explanatory.

benefit payments.

- 10c. Self-explanatory.
- Enter the total amount of unliquidated obligations, including unliquidated obligations to subgrantees and contractors.

the value of in-kind contributions applied, and the net

increase or decrease in the amounts owed by the recipient for goods and other property received, for services

performed by employees, contractors, subgrantees and

other payees, and other amounts becoming owed under programs for which no current services or performances are

required, such as annuities, insurance claims, and other

Unliquidated obligations on a cash basis are obligations incurred, but not yet paid. On an accrual basis, they are obligations incurred, but for which an outlay has not yet been recorded.

Do not include any amounts on line 10d that have been included on lines 10a, b, or c.

On the final report, line 10d must be zero.

- 10e. f, g, h, h and i. Self-explanatory.
- 11a. Self-explanatory.
- 11b. Enter the indirect cost rate in effect during the reporting period.
- 11c. Enter the amount of the base against which the rate was applied.
- 11d. Enter the total amount of indirect costs charged during the report period.
- 11e. Enter the Federal share of the amount in 11d.
- Note: If more than one rate was in effect during the period shown in item 8, attach a schedule showing the bases against which the different rates were applied, the respective rates, the calendar periods they were in effect, amounts of indirect expense charged to the project, and the Federal share of indirect expense charged to the project to date.



2.) Consolidated Report on HAVA Title I, Section 102 - Punchcard & Lever Voting System Replacement

HAVA, under Section 102 requires States to use the funding (either directly or as a reimbursement for costs incurred on or after January 1, 2001) to replace punchcard and/or lever voting systems in precincts within that State that used such systems in the November 2000 election qualifying precincts. As per Oregon's certification of Section 102, Oregon has 571 total qualifying precincts, consisting of 571 punchcard precincts and 0 lever voter system precincts. Additional requirements include:

- Systems must be replaced in time for the regularly scheduled general election for Federal office to be held in November 2004 (unless a waiver is obtained under Section 102(a)(3)(B).
- Certifications that the State will continue to comply with current voting laws stated in Section 906; and
- Certifications that the replacement voting systems will meet the requirements of Title III, Section 301.

RESPONSE:

All of the \$1,822,758 in federal funding was distributed to seven counties in Oregon for the replacement of punchcard systems (See Attached List/Table). Distribution to each county was based on a percentage of the statewide total voting age population. Additionally, as per the Act and the Oregon Election Plan, four counties that had replaced punchcard equipment since January of 2001 also qualified for reimbursement.

Currently, there is a difference of \$136, 352.19 between the reimbursement amount and the actual expenditures. The majority of this balance, \$104,390.21 to be exact, will be directed to one county upon completion of delivery of invoices and receipts. All remaining funds will be addressed this year by the HAVA Steering Committee.

Finally, all systems purchased in Oregon were optical scan/reader systems, meeting the HAVA and Oregon Election Plan objectives of standardization and uniformity when casting ballots. Oregon met the original HAVA November 2004 deadline, conformed to all identified guidelines and did not apply for a waiver from the GSA.

Total Punchcard Replacement Funding/Allocation: \$1,822,758



Punchcard Replacements

	HAVA Section 102 Reimbursement			Actual	- Household the American Control of the American Contr		Ba	Balance of
County	Amount	System Type	Quantity	Expenditures		Date Reimbursed		Amount
Clackamas	\$ 469,760.15	ES&S Model 650	5	\$ 469,760.15	15 Feb & Apr 2004	2004	s	-
Polk	\$ 61,565.51	ES&S Model 550	-	\$ 58,928.57	57 Sept 2003		↔	2,636.94
		Sequoia Voting			•			•
Lane	\$ 469,760.15	Systems 400C	5	\$ 444,760.	444,760.15 May & Aug 2004	g 2004	6	25,000.00
Linn	\$ 211,464.00	ES&S Model 650	က	\$ 210,638.	210,638.54 Sept 2003		₩	825.46
Umatilla	\$ 85,355.43	ES&S Model 550	-	\$ 85,355.43	43 Sept 2003		₩	,
Union	\$ 55,092.61	ES&S Model 550	-	\$ 51,593.03	03 Sept 2003		↔	3,499.58
Washington	\$ 469,760.15	ES&S Model 650	5	\$ 365,369.94		Oct 2003 & Mar 2004	↔	104,390.21
Totals	\$ 1,822,758.00			\$1,686,405,81	81		ø	136,352.19